

Parental Permission for Child Participation in a Parish-Sponsored Event

Saint Anthony + Saint George Maronite Catholic Church

Date / /

TO WHOM IT MAY CONCERN:

I hereby give permission for my child(ren),

_____ , _____
(print first and last name)

_____ , _____
(print first and last name)

To attend and participate in the parish activities connected with the Maronite Religious Education (MRE) and/or the Maronite Youth Organization (MYO) at St. Anthony + St. George. I understand that my child will meet at St. Anthony + St. George under the supervision of the director, teachers and volunteers.

Should an emergency arise, I also give permission for my child to be diagnosed and/or treated and medicated in accordance with standard medical practice by licensed medical personnel. I agree to assume the financial responsibility for any diagnosis, treatment and/or medication deemed necessary. I also give permission for photos that are taken during the gatherings to be used on the parish social media, newspapers.

I hereby release Saint Anthony + Saint George Maronite Catholic Church, the Diocese of Saint Maron Brooklyn and all of their agents and representatives from any and all liability in case of accident or injury incurred during this event.

Signature of parent or legal guardian

print name of parent or legal guardian

Relationship: _____

Photo Policy: ____ **Please check here if you DO NOT want your child's photos to be used in our parish and congregation's social media post.**